



MEMBERSHIP FORM

Our mission is to enable children and youth to experience the wonders of science by providing financial and volunteer support for community programs, scholarships and other educational opportunities at the California Science Center.

Please print:			
Name:			
	First	MI	Last
Spouse:			
	First	MI	Last
Address:			
City:		Zip+4	
Home Phone:		Fax:	
Work Phone:		E-mail:	
Date of Birth: Month and Day (Year optional):			
I was introduc	ed to THE MUSES	by:	

YES! I would like to become a member of THE MUSES. Enclosed is my check, <u>made payable to THE MUSES</u> at the following membership level:

- \$90 Donor
- \$140 Sponsor
- \$300 Patron

<u>A prerequisite is membership in the California Science Center.</u> A separate application will be enclosed with your MUSES membership packet.

We require all our members to support THE MUSES' annual fundraising event by purchasing a ticket or making a donation of equal amount to the Woman of the Year Award luncheon.

Please send this form along with your check to: Susan Holley: 801 South Grand Avenue, Unit 1405, Los Angeles, CA 90017